

**MISSOURI NAVIGATOR  
CONTENT OUTLINE**

*(50 scoreable questions plus 5 pretest questions)*

**I. AFFORDABLE CARE ACT**

**A. Major Provisions**

**B. Essential Health Benefits**

**C. Exemptions**

**D. Financial assistance availability and determination**

1. Individuals and families
2. Public programs (i.e., MO HealthNet and CHIP)
3. Subsidies and tax credits for small businesses
4. Advanced Premium Tax Credit (APTC) and Cost Sharing Reductions

**E. Shared Responsibility Payments**

**F. Special Populations**

1. Identifying and reaching (demographic and geographic)
2. Cultural and linguistic approaches and materials

**II. BASIC HEALTH INSURANCE CONCEPTS**

**A. Health Insurance options**

1. Health Maintenance Organizations (HMO)
2. Preferred Provider Organizations (PPO)
3. Point of Service (POS) plans
4. Exclusive Provider Organizations (EPO)
5. High Deductible Health Plans (HDHPs)
6. Health Savings Account (HSA) / Health Reimbursement Arrangements (HRA)

**B. Cost-sharing, premiums, payments**

1. Copayments
2. Deductibles
3. Coinsurance

**III. HEALTH INSURANCE EXCHANGES**

**A. Types of Exchanges**

1. State Based Marketplace (SBM)
2. State Partnership Marketplace (SPM)
3. Federally-Facilitated Marketplace (FFM)

**B. Functions of Exchanges**

1. One-stop marketplace
2. Eligibility & Enrollment
3. Single Streamlined Application Process
4. Federal Subsidies

**C. Individual Exchanges**

**D. Small Business Health Options (SHOP) Exchanges**

**E. Qualified Health Plans (QHPs)**

1. Essential Health Benefits
2. Preventive Health Services
3. Children's Coverage
4. Dental and Vision Benefits
5. Actuarial Value ("Metal Levels")

**IV. NAVIGATORS**

**A. Roles and Responsibilities**

1. Provide information fairly, accurately and impartially
2. Plan eligibility and overview
3. Plan enrollment procedures Exchange eligibility and changes
4. Medicaid eligibility (MO HealthNet)
5. Consumer assistance
6. Qualified Health Plans (QHPs) Referrals to agents/producers

**B. Privacy and security of health information**

1. HIPAA
2. Confidentiality, integrity, and availability of Protected Health Information (PHI)

**V. OUTREACH AND EDUCATION**

**A. Using culturally and linguistically appropriate language.**

**VI. MISSOURI STATUTES, RULES AND REGULATIONS  
RELATED TO HEALTH INSURANCE**

*Ref: All references are to RSMo unless otherwise noted*

**A. DIRECTOR OF INSURANCE**

1. General powers and duties  
*Ref: 374.020, 374.045, 374.210, 374.285, 375.786*
2. Examination of records  
*Ref: SB 262, 97th General Assembly, 2013, section 376.2010*
3. Orders of the Director  
*Ref: 374.046, 374.048, 374.049; SB 262, 97th General Assembly, 2013, section 376.2011*

**B. LICENSING REQUIREMENTS**

1. Obtaining a license  
*Ref: SB 262, 97th General Assembly, 2013, section 376.2004; 20 CSR 400-11.100*
2. Maintaining a license  
*Ref: SB 262, 97th General Assembly, 2013, section 376.2006*
3. License suspension, revocation, denial, cancellation  
*Ref: 375.141, 375.946; SB 262, 97th General Assembly, 2013, section 376.2010*